File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A





Des Moines, lowa 50319 Fax: 515-281-4073	DISCLOSURE	S, SEE BACK OF FORM SUMMARY PAGEN 2	60 m	, –	
COMMITTEE NAME (Must be	same as on Statement of Organ	nization)	l		
Kevin Stow for School Box	ard		1 1	FORM DR-2	
(1)Statawide/Legislative/Judge (4)County Central Committee (of committee you are reporting for: L Standing for Retention Candidate (2 5) County Candidate (6) City Candid ty PAC (8) City PAC (10) School B	State PAC (3) State Party ate (7) School Board or Other Politic	C (C	tev. 07/2007) or Office Use O omm. #	DISCLOSURE REPORT
CANDIDATE COMMITTEES Candidate Name Kevin Stow	ONLY:	Political Party (if applicable)	l Is	egged in serined	n
Office Sought School board		District (if Senate or House)	Aı	idited	
Late reports are subject to possible of the subj	ble civil and criminal penalties. Pur	suant to lowa Code sections 68B.33		1/18/	
I AM FILING A Dec	ember 31, 2008	REPORT FOR (1) ELECTIC	N /(2)NON-	ELECTION Y	EAR.
	eport date)	Indicate b			
CHECK IF AMENDMENT	•			mittees, enter D	ate of Election
Clourait a Marianaiti		and the second s	,	er 9, 2008	all of Libosof
Check if this is final (termin (You must continue t	ation) report and attach Notice of to file reports until a DR-3 is filed.	f Dissolution Form DR-3.)		ocal Committee tion is held	es, enter County in
STATEM	ENT OF CASH ON HAND				
CASH ON HAND at the begin committee. This am	ning of the reporting period. (Tot ount MUST be the same as the c period or must be zero if this is fir	al of all funds held by the ash on hand at the end	.	504.91	
	Y TAKEN IN THIS PERIOD				
	Contributions total (Attach Schedu			75.00	
Schedule F: Loans	Received total (Attach Schedule	F)	, do &244 254 4 2 6 4 8	0.00	
Schedule H: Total S	Sales of Campaign Property (Atta	ch Schedule H)		0.00	
<u>(Schedule</u>	H applies to Candidates' Comm	n <u>ittees Only)</u> SUB-TOTAL.	\$	579.91	
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD			474.91	
•	ditures total (Attach Schedule B)	=		105.00	
	lepayments total (Atlach Schedul			0.00	
CASH ON HAND at the end	of this reporting period (if final rep	ort balance must be zero)	\$	0.00	
UNPAID BILLS (From Sche	edule D - Attach Schedule D)	*************************************	\$	0.00	
IN KIND CONTRIBUTIONS	(From Schedule E - Attach Sched	iule E)	\$	0.00	
**OUTSTANDING LOANS (F	rom Schedule F - Attach Schedu	le F)	\$	0.00	
CONSULTANT BREAKDOW	N (Schedule G Attached?)		_	YES	_NO
CANDIDATE COMMITTEES	ONLY:			0.00	
VALUE OF CAMPAIGN PRO	PERTY (From Schedule H - Atta	ch Schedule H)	\$		

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form	Resid Forth	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
,		CK THIS BOX IF	
Kevin Stow for School Board	1		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISEF INCOM
	ID# CK#	Uniternized contributions for this period		\$75.00	
	ID#				
	CK#				
	CK#				
	ID#				
	CK#				
	CK#			;	{
	ID#			,	
	CK#				
	CK#				
 =-	ID#				
·	CK#				
	CK#				 L_
	ID#				
	CK#		SUB-TOTAL		
		TOTAL (if last page		\$ 75.00	-

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

FOR INSTRUCTIONS	. SEE BACK OF FORM
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Reser from	-

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Kevin Stow for School Board

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/4/08	ID# CK#1011	Ames Tribune 317 5th Street Ames, IA 50010	Newspaper advertisments - quantity of three	\$ 411.37
10/9/08	ID# CK#1012	Kevin Stow 2637 Somerset Drive Ames, IA 50010	Photographs for campaign brochure	53.50
11/21/08	ID# CK# Cahier's	Ames Education Foundation 415 Stanton Avenue Ames, IA 50014	Contribution - remaining campaign funds	10.04
	ID# CK#			9
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID#			r
	CK#		SUB-TOTAL	\$ 474 91

TOTAL (if last page of this schedule)

\$ 474.91

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and lowa Code 68A 402(3)(I).)

P	1	1	
Page			

INSTRUCTION	About he came on an Statement of Omenianiani			F	LOANS
in Stow for S	(Must be same as on Statement of Organization) Phool Board		(Rev. 02/08)	& RECEIV
	e reports money loaned to the committee which is deposited in the canonic state of the canoni	committee account		AMENDII	
TI. MONETAL	Y LOANS RECEIVED <u>THIS</u> REPORTING PERIOD ource of loan, such as a bank, must be shown if a third party is invo	ved. Include loans from	m candida	te's personal i	funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHII CANDIDATE (If Ap		AMOUNT	OF LOAN
				\$	
					•
			······································		- 1
					-
ART II - MONET (Loans I	ARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD orgiven must be reported on Schedule E — In-kind Contributions.)	TOTAL (PART I)		\$ 0.00	
ART II - MONET (Loans I DATE PAID (MM/DD/YR)	ARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD orgiven must be reported on Schedule E — In-kind Contributions.) NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	TOTAL (PART I) RELATIONSHI CANDIDATE* (IF A		AMOUNT	REPAID
(Loans to	orgiven must be reported on Schedule E In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSH		AMOUNT	
(Loans I DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Kevin Stow	RELATIONSH		AMOUNT	
(Loans I DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Kevin Stow	RELATIONSH		AMOUNT	
(Loans I DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Kevin Stow	RELATIONSH		AMOUNT	
(Loans I DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Kevin Stow 2637 Somerset Dr., Arnes 50010	RELATIONSH CANDIDATE* (If A	pplicable)	* 105.	
(Loans I DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Kevin Stow 2637 Somerset Dr., Arnes 50010	RELATIONSHI CANDIDATE* (II A EPAYMENTS (PART II L LOANS FORGIVEN	pplicable)	AMOUNT	